

CLAIMS ONLY							Application Number 19687089		Filing Date	
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51			
2		1					52			
3							53			
4							54			
5							55			
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43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	1		1		1		Total Indep			
Total Depend							Total Depend			
Total Claims	2						Total Claims			